Need for a New Framework for Supervision of Counsellors in the Indian Context: A Review

Vinod Victor

PhD Research Scholar, Centre for Research and Evaluation, Bharathiar University, Coimbatore, Tamilnadu, India Assistant Professor, Montfort College, Bangalore, Karnataka, India

Abstract: Counselling and Supervision are trying to keep pace with their competency-based theoretical models. Supervision is an essential aspect of continuing professional development. Supervisors in various settings are tasked with carefully monitoring the services provided by counsellors in an effort to seek assurance that service delivery maximizes each treatment opportunity. The role of the supervisor must expand and many find themselves ill-equipped to deal with the many demands being placed on them. While the use of technology comes with many ethical questions relating to security and confidentiality, one must continue to explore all means of improving the effectiveness of our services while staying within the bounds of ethical practice (Durham, 2019). So not just supervision training but quality and effective supervision training is the need of the hour. Hence to suitably regulate the profession and improve patient and societal outcomes there is a need to develop a framework suitable to the Indian context and train supervisors.

Keywords: professional development, counselling, supervision of counsellors, multiculturalism, cultural competency, Indian context, integrative practices

Everything in the post-modern world is "Mix and match." It is quite difficult to standardize. "Integration" is a new term that appears in every field. Everyone aspires to practice integration, and this can be observed in culture, medicine, education and in counselling & psychology as well. The term "integrative practices" is the latest buzzword. It almost has an overtone of cultural diversity –which aims not to leave out anyone but to include everyone. Counselling and Supervision are trying to keep pace with their competencybased theoretical models. In the past few decades, supervision has received a great deal of attention and support in the West. Many of the theoretical models have undergone revisions to incorporate the growing needs of the counselling and supervision fields.

Supervision is an essential aspect of continuing professional development and plays a key part in ensuring good practice and high-quality care. Professionals at all levels of their careers will benefit from supervision, as it provides an important opportunity to reflect on their professional practice, including what went well, or not so well, and where improvements could be made. Supervision in the simplest sense is the handholding process of a newbie by an experienced person to enable them to assimilate into the profession.

Definitions of Terms

Supervision

It is important to start with the definition of supervision. At its core, supervision is a process of professional learning and development that enables individuals to reflect on and develop their knowledge, skills, and competence, through agreed and regular support from another professional. Supervision is commonly described as a process in which an experienced professional offers support and provides both professional and personal input into the training of a supervisee (Carson & Becker, 2003). The American Psychological Association (APA) defines it as below: Supervision is a distinct professional practice employing a collaborative relationship that has both facilitative and evaluative components, that extends over time, which has the goals of enhancing the professional competence and science-informed practice of the supervisee, monitoring the quality of services provided, protecting the public, and providing a gatekeeping function for entry into the profession. Henceforth, supervision refers to clinical supervision and subsumes supervision conducted by all health service psychologists across the specialities of clinical, counseling, and school psychology. (APA, 2014).

A more developed definition recently by the BACP states it as - "A specialised form of mentoring provided for practitioners responsible for undertaking challenging work with people. Supervision is provided to ensure standards, enhance quality, advance learning, stimulate creativity, and support the sustainability and resilience of the work being undertaken" (BACP, 2017).

Supervisor

APA describes a competent supervisor to be an individual who "possesses and maintains knowledge, skills, and values/attitudes that comprise the distinct professional competency of clinical supervision as well as general competence in the areas of clinical practice supervised and in consideration of the cultural contexts" (APA, 2014). The BACP describes it as a person who "should be sufficiently experienced in counselling and psychotherapy, or a closely related field, and ideally have some training and qualifications in supervision" (BACP, 2017).

Supervisee(s)

"Supervisee is a person who functions under the extended authority of the psychologist to provide, or while in training to provide, psychological services" (APA, 2014).

Professional Counsellor/Therapist

"An individual professionally trained in counseling, psychology, social work, or nursing who specializes in one or more counseling areas, such as vocational, rehabilitation,

educational, substance abuse, marriage, relationship, or family counseling. A counsellor provides professional evaluations, information, and suggestions designed to enhance the client's ability to solve problems, make decisions, and effect desired changes in attitude and behaviour" (APA Dictionary of Psychology, n.d.). In this study, they would also be called supervisees as they get supervision from a supervisor. The only difference with the supervisees defined above is the fact that they have completed their training and are working as professional counsellors.

Indian Context

The researcher would like to define the Indian context as the context associated with the geographical location of the country of India (Profile | National Portal of India, 2022).

Framework

The dictionary defines a framework as "a basic structure, plan, or system, as of concepts, values, customs, or rules, a skeletal structure designed to support or enclose something" (Collins, 2018). The researcher uses this term to describe a structure that supervisors can use to supervise professional counsellors in the Indian context.

Counselling

"Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals" (Kaplan et al., 2014). APA, on the other hand, defines it as "professional assistance in coping with personal problems, including emotional, behavioral, vocational, marital, educational, rehabilitation, and life-stage (e.g., retirement) problems" (APA Dictionary of Psychology, n.d.). For Rogers (1957) it was six specified conditions that he considered both necessary and sufficient for therapeutic change to occur in clients and that they apply to all psychotherapy and not just to client-centred therapy. These are "counsellor congruence or genuineness in the therapeutic relationship, unconditional positive regard for the client (warmth), the ability of the counsellor to empathize with the client in this relationship, and communication of empathy and unconditional positive regard to the client", (Rogers, 1957).

'Universal System of Counselling or Psychotherapy' is as follows: "(1) Respect for the client, (2) Genuineness, (3) Empathic understanding, (4) Communication of empathy, respect and genuineness to the client (Rogers, 1957) and (5) Structuring (especially for intercultural counselling)" (Vontress, 1976; Patterson, 2004).

Multiculturalism

While there are many definitions for multiculturalism, this study would use Victor's definition of multiculturalism for the Indian context – '*ComplexusVarietas*'.It refers to "the complexity and diversity that an individual carries within him / her, be it ethnicity, religion, social class, or gender along with the sub-complex combinations of caste, community, family and personal values (religious, moral, social values), disability and language that are dynamic and can be different for two people within the same family,

specifically seen in the Indian Sub-Continent" (Victor, 2012).

The Need for Supervision

Psychotherapy supervisors serve foremost as agents of transformation, their chief objective being to actuate and actualize a transformative process of therapist development (Watkins Jr., 2020).

Watkins Jr. (2020) further states:

As the signature pedagogy, supervision strives to cultivate and inculcate habits of head, hand, and heart—the respective content, skills, and values so necessary for the beginning therapist supervisee to engage in "good work" (15, 17). Transformative in purpose and design (18, 19), supervision draws on practical experience and reflection in developing new intervention behaviors and practice understandings (20). "In professional education, it is insufficient to learn for the sake of knowledge and understanding alone; one learns in order to engage in *practice*" (21)(italics in original). Supervisors ideally use a host of available methods in fostering supervisee learning (e.g., live observation, video review, case discussion) (2, 22) (Watkins Jr., 2020).

In a study on professional identity among counselling psychology doctoral students, the participants agreed that supervision is crucial for the development of professional identity and believed that positive supervision helped them develop it. Supervision can address emerging professional identity more directly. It is a process "within the interpersonal context of supervision" (Gazzola et al., 2011). There is no doubt about the role and need of supervision in the helping professions (Bernard & Goodyear, 2018; Borders & Brown, 2022; Falender & Shafranske, 2004; Hawkins & Shohet, 2006; Loganbill et al., 1983). In the Indian context, supervision of Counsellors is at an early stage as there is a slow recognition in many academic and training circles of its need and importance, due to a lack of understanding of what it is or how it is done from a theoretical and practice perspective.

Benefits of Supervision

Being a professional requires ongoing reflection in order to analyse one's work and get new perspectives. This requires reflection on both successful achievements and difficult circumstances. Maintaining current knowledge and skills that are applicable to one's practice is essential for safe and efficient practice that adheres to professional standards. By identifying and filling up knowledge gaps, supervision contributes to Continuing Professional Development (CPD) by ensuring that therapists have the most recent skills and information. Therefore, supervision can aid in the development of insight as well as the maintenance and improvement of good practice. It can assist in recognising errors, correcting them, and avoiding making the same mistakes twice. This can also boost therapists' confidence and result in better service delivery. Supervision can also have a positive impact on career advancement by assisting in finding professional growth possibilities, improving selfconfidence and critical thinking, and keeping track of progress.

Supervision enhances patient outcomes, Supervision improves well-being, Supervision improves the work environment and culture.

Supervision of Counsellors

Supervision is generally accepted as the most important part of the training as well as the practice of the counselling profession. Clinical supervision by a senior therapist is a very common practice in psychotherapist training and psychiatric care settings. Clinical supervision is advocated by most educational and governing institutions (Alfonsson et al., 2017). In the early 1980s, Logan et al. (1982) wrote, "Clinical supervision is one of the central activities of our profession" (p. 3). Presently, supervision calls for unique skills different from those used in Counselling and requires additional training and competency in Supervisory knowledge and skills. Moreover, research also documents that clinical knowledge and skills are not easily transferable unless its development is facilitated by the supervisee's engagement in reflection in the supervision (Falender & Shafranske, 2008). "Clinical supervision is now recognized as a complex exchange between supervisor and supervisee, with supervisory models/theories developed to provide a frame for it" (Smith K. L., 2009). The Western world requires supervisors to receive specialized training in supervision before credentialing them as approved supervisors (Page A. C., 2006). The growth of supervision over the past few decades has been exponential and is still growing.

According to Wheeler and Richards' review study from 2007, the activity of supervision contributed to the supervisee's improvement of self-awareness, self-efficacy, support, and client outcomes. A systematic review of literature by Wheeler and Richards found that "Five studies provided evidence of skill development as a product of supervision. Borders (1990) found that supervisees reported a more consistent application of acquired skills and knowledge when working with clients as a result of supervision" (Wheeler & Richards, 2007). Constructive supervisors actively ask supervisees introspective questions to help them focus on their understanding of clients and client issues, internal responses to and feelings about their clients, their hunches about potential intervention strategies, and to assess the strengths and limitations of their approaches (Guiffrida D., 2014).

However, it seems like a new theory or model of supervision emerges every other day. Instead of helping the learner, it just makes them more confused and weary. Supervision is such a complex process. In the future, information on this process will only become more profuse. While some clarity is gained as a result of developing newer models, they also frequently raise new issues and topics that require further exploration. As long as there is counselling and supervision, this race will continue on. It is imperative to find a better alternative for the future, since, "no matter how long one has practised, supervision is a critical aspect of effective counselling and psychotherapy" (Ivey, Ivey, & Zalaquett, 2014).

Types of Supervision

Individual Supervision

Individual Supervision is "a tutorial and mentoring relationship between a member of the counseling professional and one counseling student" (CACREP, 2016).

Group Supervision

Supervision that occurs with a minimum of three and a maximum of twelve counsellors in training (CACREP, 2009), "a tutorial and mentoring relationship between a member of the counseling professional and more than two counseling students" (CACREP, 2016).

Triadic Supervision

The triadic supervision started with 3 people playing the role of supervisee, commentator and facilitator. Sometimes a supervisor is added to this group (Spice & Spice, 1976). Currently, it is a "tutorial and mentoring relationship between a member of the counseling profession and two counseling students" (CACREP, 2016).

Cybersupervision

"Cybersupervision has two main forms: (a) asynchronous cybersupervision and (b) synchronous cybersupervision. Asynchronous cybersupervision involves some combination of the use of e-mail, audio file sharing, and video file sharing, which does not require concurrent (i.e., real-time) interaction between supervisors and supervisees. Synchronous cybersupervision involves some combination of the use of chat, audio file sharing, and video file sharing executed in a concurrent manner, often through a videoconferencing platform such as Adobe Connect. Additionally, hybrid supervision refers to face-to-face supervision in some combination with asynchronous cybersupervision and/or synchronous cybersupervision" (Bender & Dykeman, 2016; Dubi et al., 2012).

Supervision of Counsellors in the Indian Context

The popularity of the earlier trend of holistic approaches to healthcare and well-being, (Hill et al., 2015) has only increased – thanks to the spurt of lifestyle diseases (e.g., diabetes) and autoimmune diseases. This is once again bringing the focus on mental health and hence the field of counselling. While counselling is a relatively new field in India, it came into more prominence with the COVID-19 pandemic with the help of social media influencers. While this trend raised awareness of the need for Counselling and trained Counsellors. The need for Trained Supervisors has not yet been given its due. The lack of supervisors and supervision is hurting the tender growth spurts of counselling in the Indian context with the threat of shunted growth.

Hawkins and Shohet (2006) relate supervision to the "nursing triad" analogy of the late Donald Winnicott, which describes how a child can be held even when they need to vent their negative feelings as long as their mother is simultaneously being held and supported by their father or another caring adult. Similarly, a "good enough" counsellor can withstand the client's negative attacks through the strength of being held within the supervisory relationship (Hawkins & Shohet, Supervision in the Helping Professions,

2006). This is the kind of supervision needed in the Indian context as counselling itself is like a little child and counsellors need to be supported by a caring supervisor for the field to grow as well as their own growth.

The 2013 study on the Role of Counselling Supervision in Enhancing Counselling Skills and Expertise by Gandhi and Rajan concluded that "counselling supervision had improved micro-skills of the counsellors" (Gandhi & Rajan, 2013). While this is noteworthy, it is imperative to state that skills is just one component of development in supervision.

Challenges to Supervision in India

Gatekeeping: One of the purposes of supervision is that of gatekeeping. "It is the obligation of the supervisors to identify and prevent those who do not fit into the shoe of that of a helper from entering into the profession" (Bernard & Goodyear, 2014). In India however, even clinical psychologists and rehabilitation psychologists who are regulated by the Rehabilitation Council of India (RCI) do not require supervision post-training (Manickam, 2020). The role of supervisors as gatekeepers is more like a fable that does not fit in this context, at the present time.

Trained Supervisors: Secondly, "Supervision provides the structure and framework for learning how to apply knowledge, theory, and clinical procedures to solve human problems". The knowledge that is transmitted in clinical supervision is based on the supervisor's own knowledgebased skills acquired through their accumulated experience, training and supervision. However, its impact on a supervisee is also influenced by the supervisee's own personality dynamics such as relational or interpersonal dynamics, level of self-confidence and degree of selfunderstanding (Bernard & Goodyear, 2018). Hence the need for trained supervisors. It also assists with the development of the professional identity of the supervisees by providing a supportive learning environment (Falender & Shafranske, 2004). With the lack of trained supervisors, the quality of trained professionals entering the field is also affected. Supervision is currently provided during training. And it is unclear how counsellors address issues post-training, as supervision is not mandated in India for practitioners (Pereira, 2012; Thomas, 2011). The ACA Code of Ethics requires professional counsellors to address their impairment and have continuous professional development (ACA Code of Ethics, 2016). However, beginning counsellors do not access supervision, post their training and obviously are not working to their full potential. Pereira (2017) again reiterates that supervision is not available in some settings and a lack of network of mental health professionals to access supervision is a problem faced by beginning counsellors (Pereira, 2017). It is this author's experience that supervision is not available in many settings.

Culturally Competency: Another aspect of counselling and supervision is Comprehensive Cultural Competency which includes knowledge and awareness of culturally based healing and wellness practices. Kesler et al., talking from the medical fraternity, emphasize that Healthcare providers should be aware of the individual patient's beliefs, culture, and use of culturally based health practices because patients may adopt such practices for general wellness or as adjunct therapies without the benefit of discussion with their healthcare provider (Kesler et al., 2015).

Arulmani (2007) commenting on the status of counselling in India stated that "Indian reality demands a psychology of counselling that is relevant, culturally validated, and dynamic enough to accommodate the great variations that compose the Indian situation" (Arulmani, 2007). Weaver et al., (2023) express, "We urge researchers and practitioners working in India to adopt approaches that prioritize culturally-informed methods of distress management and address the social and structural causes of suffering rather than delivering standardized clinical mental healthcare in short-term interventions" (Weaver et al., 2023). "Competency-based supervision is a metatheoretical approach that provides systematic attention to the component parts of the supervision process" that enhances accountability and is an evidence-based practice. "This approach systematically addresses the supervisory relationship, bidirectional feedback, infusion of multiculturalism and diversity, and ethical and legal standards" (Falender & Shafranske, 2016). Multicultural competency is a big word in Western literature but unfortunately, it does not reflect on the multicultural ethos and context of the diverse nation of India.

In a study on multicultural issues faced by counsellors in the Indian context (Victor, 2012), Supervision was the most important factor identified and also recommended for handling multicultural issues in the Indian context. The multicultural factors in Western literature, especially race and ethnicity do not extrapolate in the Indian context and also it fails to factor in the other aspects that are relevant here, such as the "sub-complex combinations of caste, language, disability, family values (religious, moral, social values), that are dynamic and can be different for two people within the same family" (Victor, 2012). A constructive supervisor works to build rapport with supervisees so they can safely explore new ways of understanding and engaging with their clients & the various multicultural facets that impact their lives.

India is a melting pot of multiculturalism; supervision will have to consider these factors for effective clinical practice. To build competent practitioners, there is a need for competent supervisors who are trained in models of supervision that are relevant to the Indian context. The need includes Supervisor Training to cover a balance of all these aspects of Supervision knowledge. There are no models present that can be used in the Indian context. Hence a framework that can adapt different models to this context needs to be developed.

Modern growth & Demands: Fourthly, in today's world of behavioural healthcare, programs, clinics, and counsellors are held accountable in ways never before experienced. New demands for cost containment have resulted in our constant search for innovative ways to provide treatment and clinical supervision (Durham, 2019). With the advent of Employee Assistance Programs (EAP), there is now the reality of the 'global village' with therapists providing services beyond their geographical boundaries. With newer areas needing

service delivery and falling beyond the confines of established Western or European countries, the need for therapists locally has created a need as well as dilemmas. Focusing on the Indian context, there is no licencing body for Counselling Psychologists. The Rehabilitation Council of India (RCI) which regulates and monitors services in the field of Rehabilitation and Special Education, currently only recognizes psychiatrists, clinical psychologists and rehabilitation therapists. They are already a minuscule number compared to the huge need in the population, and who at this time are not required to be supervised post training. This stresses or demands for the need to regulate Counselling Psychologists in India. For effectively regulating the profession, the need is for trained supervisors and hence a suitable framework to train them.

Diversity & Standardization: Lastly, there is a wide variability in styles and quality. Added to the lack of training there is also a challenge to standardization (Victor & Sudha, 2012). In India, the standards of different countries such as the APA or BACP "are difficult to adhere to, given the differences in the socio-cultural, linguistic, religious and economic milieu. This also brings a number of ethical dilemmas that supervisors and supervisees face on a regular basis" (Victor & George, 2012). Hence a framework that is simple, reflective and easily adaptable is needed.

The need is augmented in light of the increase in newly developed postgraduate counselling psychology courses that place more emphasis on practice and supervision than theory with supervised practicum and internship arrangements. Trainees often receive individual and group supervision on campus at least once per week. The supervisory session focuses on client and supervisee issues with audio and videotape verbatim. Due to the increase in the training programs and the demands of these programs, there is a new challenge to meet the supervision requirement with a lack of professionally trained supervisors. Some centres have peer supervision and online peer supervision groups to mitigate this shortage. Private sector companies and counselling programs insist on quality supervision (Victor & George, 2012). Hence there is a huge need for training of supervisors as India stands at the crossroads of a revolution in the mental health field. The framework of supervision should be relevant to the Indian context along with a training program to impart it.

Need for Study

In India, stigma and discrimination towards those who suffer from mental illnesses are significant obstacles to using mental health services. If Society has more evidence of positive (and realistic) testimonies of experiences with mental health care from patients/clients who have used the services and who are employed and socially included in their communities; it has the potential to reduce stigmatising attitudes. Finding the best strategy for the Indian population requires contextualising these evidence-based approaches. Service providers also contribute to the spread of stigma, thus it is crucial to address this problem both in professional development programmes and in therapeutic settings (Shidhayea & Kermode, 2012). One of the ways to do this is to provide adequate and relevant supervision. A trained supervisor and a good framework will help mitigate the potential stigmatization by picking these in the supervision process and help the supervisee overcome these by developing the needed competency.

Secondly, the fields of Counselling and Psychology are seeing the rapid emergence of various new theoretical models and their integration with one another. Cognitive Analytic Therapy is one example of the integration of CBT and the Psycho-dynamic approach. This is also seen with the development of many models of supervision. Even in the Indian context, there is an attempt to make it relevant by focusing on Indian psychology. Though clinical supervision has long been practised in the behavioural health professions, most research and training in this subspecialty has occurred during the last few decades. Whereas counselling and psychotherapy have had the benefit of much research-based literature from which to draw, there has been a dearth of research on clinical supervision (Durham, 2019). The dearth is even more stark in the Indian context.

Thirdly, is the fact, that decades back, the start of mental health in India primarily started with psychiatry. Even at that stage, Dr. Surya asked, "WHAT IS INDIAN ABOUT INDIAN PSYCHIATRY?" "It was a question he would repeat often and point out that it is high time to free oneself from the imported knowledge of the West by way of "adaptology" and attempt to build up a meaningful experiential as well as statistical database that is indigenous" (G.G. Prabhu, 2005). Dr N. C. Surya was the first Indian author who openly questioned the relevance of the concept of 'dependence' in the Indian setting. He wanted people to understand the culture first before even prescribing something. "Ours is a complex civilization... the concept of health is based not only on the current scientific knowledge but also on the inherent value system of a culture" (Wig N.N., 1996). Supervisors in various settings are tasked with carefully monitoring the services provided by counsellors in an effort to seek assurance that service delivery maximizes each treatment opportunity. The role of the supervisor must expand and many find themselves ill-equipped to deal with the many demands being placed on them. While the use of technology comes with many ethical questions relating to security and confidentiality, one must continue to explore all means of improving the effectiveness of our services while staying within the bounds of ethical practice (Durham, 2019). So not just supervision training but quality and effective supervision training is the need of the hour.

Hence to suitably regulate the profession and improve patient and societal outcomes there is a need to develop a framework suitable to the Indian context and train supervisors.

References

- [1] Carson, D., & Becker, K. (2003). *Creativity in psychotherapy*. The Haworth Clinical Practice Press.
- [2] ACA Code of Ethics. (2016, July 25). Retrieved from American Counseling Association: https://www.counseling.org/resources/aca-code-ofethics.pdf

International Journal of Science and Research (IJSR) ISSN: 2319-7064 SJIF (2022): 7.942

- [3] Alfonsson, S., Spännargård, Å., Parling, T., Andersson, G., & Lundgren, T. (2017, May 11). The effects of clinical supervision on supervisees and patients in cognitive-behavioral therapy: A study protocol for a systematic review. *Systematic Reviews*, 6(1), 94. https://doi.org/10.1186/s13643-017-0486-7
- [4] American Psychological Association. (2015). Guidelines for Clinical Supervision in Health Service Psychology. https://www.apa.org/about/policy/guidelinessupervision.pdf. American Psychologist, 70(1), 33–46. https://doi.org/10.1037/a0038112
- [5] APA Dictionary of Psychology. (n.d.). Retrieved from APA Dictionary of Psychology: https://dictionary.apa.org/counselor
- [6] British Association for Counselling and Psychotherapy. (2017). Guide to supervision: https://www.bacp.co.uk/membership/registeredmembership/guide-tosupervision/#:~:text=Supervision%20is%20a%20value %20of,undertaking%20challenging%20work%20with %20people
- [7] British Association for Counselling and Psychotherapy.(2017, July 28). Register guide to supervision.https://www.bacp.co.uk: https://www.bacp.co.uk/membership/registeredmembership/guide-to-supervision/
- [8] Bender, S., & Dykeman, C. (2016). Supervisees' perceptions of effective supervision: A comparison of fully Synchronous cybersupervision to traditional methods. *Journal of Technology in Human Services*, 34(4), 326-337.https://doi.org/10.1080/15228835.2016.1250026

 [9] Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision* (5th ed.). Pearson Education.

- [10] Bernard, J., & Goodyear, R. (2018). *Fundamentals of clinical supervision* (6th Edition ed.). Pearson.
- [11] Borders, L. D., & Brown, L. L. (2022). *The new* handbook of counseling supervision. Routledge. https://doi.org/10.4324/9781003251583
- [12] CACREP. (2016). CACREP Standards. https://www.cacrep.org/: https://www.cacrep.org/wpcontent/uploads/2017/08/2016-Standards-withcitations.pdf
- [13] Collins. (2018). English Dictionary Complete and Unabridged.
 https://www.collinsdictionary.com/dictionary/english/f ramework. Collins.
- [14] Dubi, M., Raggi, M., & Reynolds, J. (2012). Distance supervision: The PIDIB model. American Counseling Association Conference. Ideas and Research You Can Use: VISTAS. Retrieved from https://www.counseling.org/docs/defaultsource/vistas/vistas_2012_article_82.pdf
- [15] Durham, T. G. (2019). *Clinical supervision: An overview of functions, processes and methodology.* NAADAC, the Association for Addiction Professionals.
- [16] Falender, C. A., & Shafranske, E. P. (2004). *Clinical supervision: A competency-based approach*. American Psychological Association.

- [17] Falender, C. A., & Shafranske, E. P. (2008). *Casebook* for clinical supervision: A competency-based approach. American Psychological Association. https://doi.org/10.1037/11792-000
- [18] Falender, C. A., & Shafranske, E. P. (2016). Supervision essentials for the practice of competencybased supervision. American Psychological Association.
- [19] G.G. Prabhu. (2005). Personal perspectives of mental health scenario [59 2 95]. Indian Journal of Psychological Medicine, 27(1), 65-78. https://doi.org/10.1177/0975156420050108
- [20] Gandhi, A., & Rajan, P. (2013). Role of counselling supervision in enhancing counselling skills and expertise: A Saksham Experience. *The Indian Journal* of Social Work, 74(2), 289-306.
- [21] Gazzola, N., Stefano, J. D., Audet, C., & Theriault, A. (2011). Professional identity among counselling psychology doctoral students: A qualitative investigation. *Counselling Psychology Quarterly*, 24(4), 257-275. https://doi.org/10.1080/09515070.2011.630572
- [22] Guiffrida, D. (2014). A Constructive approach to counseling and psychotherapy supervision. *Journal of Constructivist Psychology*, 28(1), 40-52. https://doi.org/10.1080/10720537.2014.922911
- [23] Hawkins, P., & Shohet, R. (2006). *Supervision in the Helping Professions*. Open University Press.
- [24] Hill, L. L., Nichols, J., Wing, D., Waalen, J., & Friedman, E. (2015). Training on exercise is medicines within an integrative medicine curriculum. *American Journal of Preventive Medicine.*, 49(5S3), S278-S284. https://doi.org/https://doi.org/10.1016/j.amepre.2015.0 8.018
- [25] Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2014). Intentional Interviewing and Counseling: Facilitating Client Development in a Multicultural Society (6th ed.). Cengage Learning.
- [26] Kaplan, D. M., Tarvydas, V. M., & Gladding, S. T. (2014). 20/20: A vision for the future of counseling: The new consensus definition of counseling. *Journal of Counseling & Development*, 92, 366-372. https://doi.org/10.1002/j.1556-6676.2014.00164.x
- [27] Kesler, D., Hopkins, L. O., Torres, E., & Prasad, A. (2015, November). Assimilating traditional healing into preventive medicine residency curriculum. *American Journal of Preventive Medicine*, 49(5S3), S263-S269. https://doi.org/https://doi.org/10.1016/j.amepre.2015.0 7.007
- [28] Loganbill, C., Hardy, E., & Delworth, U. (1983).
 Supervision: A conceptual model. *The Counseling Psychologist*, 10.1, 3-42.https://doi.org/10.1177/0011000082101002
- [29] Manickam, L. S. (2020). Supervisors as gatekeepers to the profession of counselling and psychotherapy. *Wisdom:* 2(3), 3.
- [30] Page, A. C. (2006). *Clinical psychology for trainees: Foundations of science-informed practice*. Cambridge University Press.
- [31] Patterson, C. H. (2004). Do we need multicultural counseling competencies? *Journal of Mental Health Counseling*, 26(1), 67-

Volume 13 Issue 1, January 2024

Fully Refereed | Open Access | Double Blind Peer Reviewed Journal

www.ijsr.net

73.https://doi.org/10.17744/mehc.26.1.j7x0nguc7hjh54 5u

- [32] Pereira, M. (2012, June). Professional problems faced by beginning counsellors. http://archives.christuniversity.in/disk0/00/00/49/55/01 /Binder1.pdf [MPhil Dissertation]. Christ University
- [33] Pereira, M. (2017). Problems, difficulties and challenges faced by counsellors. *International Journal* of *Indian Psychology*, 4(3), 65-72. https://doi.org/10.25215/0403.127
- [34] *Profile* (2022, May 22). *National Portal of India*. https://www.india.gov.in/india-glance/profile
- [35] Rogers, C. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal* of Consulting Psychology, 21(2), 95-103.https://doi.org/10.1037/h0045357
- [36] Shidhayea, R., & Kermode, M. (2012). Stigma and discrimination as a barrier to mental health service utilization in India. *International Health*, 5(1), 6-8. https://doi.org/10.1093/inthealth/ihs011
- [37] Smith, K. L. (2009, September 1). A brief summary of Supervision Models. https://www.marquette.edu/education/graduate/docum ents/brief-summary-of-supervision-models.pdf. Retrieved from Marquette University.
- [38] Spice, C. G., & Spice, W. H. (1976). A triadic method of supervision in the training of counselors and counseling Supervisors. *American Counseling Association*, 14(4), 251-258. https://doi.org/https://doi.org/10.1002/j.1556-6978.1976.tb02002.x
- [39] Thomas, E. (2011). Personal development components in post-graduate counseling programs in Bangalore: An evaluation. [MPhil Thesis]. Christ University.
- [40] Victor, V. (2012, April). An exploration of the facets of multicultural issues faced by counsellors in Indian context. http://archives.christuniversity.in/disk0/00/00/49/97/01

http://archives.christuniversity.in/disk0/00/00/49/97/01 /Binder1.pdf. Christ University.

- [41] Victor, V., & George, T. S. (2012, January 5). Ethical dilemmas in counseling supervision. Second International Conference on Counselling, Psychotherapy and Wellness and the Third Congress of SithCp3. Unpublished Scientific Paper Presentations.http://iccp2012.weebly.com/program.ht ml. Christ University
- [42] Victor, V., & Sudha P S. (2012, January 5). The Indian challenge to standardization for counselling and psychology. Second International Conference on Counselling, Psychotherapy and Wellness and the Third Congress of SithCp3. Unpublished Poster Presentation.

http://iccp2012.weebly.com/program.html

- [43] Vontress, C. E. (1976). Racial and ethnic barriers in counseling. In P. Pedersen, W. J. Lonner, & J. Draguns, *Counseling across cultures* (pp. 42-64). Honolulu, HI: University Press of Hawaii.
- [44] Watkins Jr., C. (2020, January 6). The psychotherapy supervisor as an agent of transformation: To anchor and educate, facilitate and emancipate. *American Psychiatric Association*, 73(2). 57-62. https://doi.org/https://doi.org/10.1176/appi.psychothera py.20190016

[45] Wheeler, S., & Richards, K. (2007). The impact of clinical supervision on counsellors and therapists, their practice and their clients. A systematic review of the literature. *Counselling and Psychotherapy Research*, 7(1), 54-65. https://doi.org/10.1080/14733140601185274

 [46] Wig N.N. (1996). DR. N.C. SURYA - The lone rider. *Indian Journal of Psychiatry*, 38(1), 2-8. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC29707 75/pdf/IJPsy-38-2.pdf